Case 2:21-cv-00778-TAD-KK Dogiczent 34	COMPLETE THIS SECTION ON DELIVERY PAGE 10 #
Complete items 1, 2, and 3.	A. Signature
Print your name and address on the reverse	X hallan Addressee
so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery
or on the front if space permits.	In mailbox 71
1. Article Addressed to: Barry Busnyl BLM	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
1220 S.W. 3rd Avenue	
portland on 97204	
9590 9402 5564 9249 4376 28	3. Service Type □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail Restricted Delivery □ Certified Mail Restricted Delivery □ Certified Mail Restricted Delivery □ Return Receipt for
2. Article Number (Transfer from service label)	□ Collect on Delivery □ Collect on Delivery Restricted Delivery □ Collect on Delivery Restricted Delivery □ Signature Confirmation □ Signature Confirmation
2019 2280 0000 5049 8692	☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)
PS Form 3811, July 2015 PSN 7530-02-000-9093	Domestic Return Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3.	A. Signature
Print your name and address on the reverse so that we can return the card to you.	X ZerMunten Addressee
Attach this card to the back of the mailplece,	B. Received by (Printed Name) C. Date of Delivery
or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1? Yes
U.S. Attorney	If YES, enter delivery address below:
11600 100	
western District of LA	
ow caffayete St. Stc. 2200	Section 1
Western District of LA 800 Cattayette St. Stc. 2200 Catayette, La 70501-6932	SS Mediter in Electric
	3. Service Type
0500 0400 5564 0040 4077 70	☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery ☐ Delivery
9590 9402 5564 9249 4377 72	☐ Certified Mall Restricted Delivery ☐ Return Receipt for Merchandise
2. Article Number (Transfer from service label)	☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation ☐ Signature Confirmation ☐ Insured Mall Restricted Delivery ☐ Restricted Delivery
7019 2280 0000 5049 8548	3 Insured Mall Restricted Delivery Restricted Delivery (over \$500)
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt
SENDER: COMPLETE THIS SELEN	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3.	A. Signature
Print your name and address on the reverse so that we can return the card to you.	X Agent
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? The Yes
Civil Process Clerk	If YES, enter delivery address below:
4.5. Aftoney General	APR 5 202
950 Pennsujuania And All	2021
Machinaria M. Janzas and	
4.5. Attorney General 950 Pennsujuania Ave. NW Washington, DC 20530-0001	3. Service Type
	Adult Signature ☐ Adult Signature ☐ Registered Mail™ ☐ Registered Mail™ ☐ Registered Mail™ ☐ Registered Mail ™
9590 9402 5564 9249 4377 65	Certified Mail® Certified Mail Restricted Delivery Return Receipt for
	J Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation (1)
7019 2280 0000 5049 8555	Isured Mail Restricted Delivery Ver \$500)